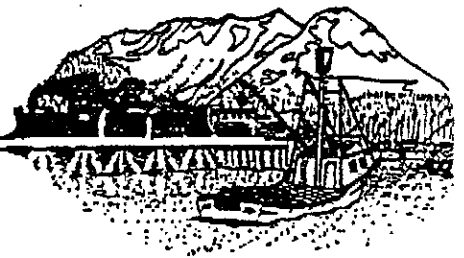


CITY OF CORDOVA



TO WHOM IT MAY CONCERN

I, Lynda Plant, the duly appointed City Clerk of the City of Cordova, Alaska;

DO HEREBY CERTIFY that the Cordova Community Hospital is a city owned facility and is tax exempt under state and federal law.

Lynda Plant
Lynda Plant, City Clerk
City of Cordova, Alaska



EIN - 92-0139171

**Cordova Community Medical Center
Policies and Procedures**

DEPARTMENT: Materials Management	POLICY # MM 601
SUBJECT: Purchase Requests	EFFECTIVE DATE: MAR 14 2002
Page 1 of 2	

Policy:

Purchase Requisition will be filled out by requesting departments, signed by the department manager and forwarded to the Materials Management (MM) department.

Procedure:

1. Fill out the requisition as completely as possible. Necessary information is:
 - A. Requesting department (required)
 - B. Cost center (helpful)
 - C. Charge department (required)
 - D. Vendor name or number (required)
 - E. Phone number (required)
 - F. Fax number (required)
 - G. Requested shipping method (helpful)
 - H. Item number (required)
 - I. Description (required)
 - J. Quantity (required)
 - K. Signature of Department Manager (required)
2. If any of the required fields are not filled out the purchase may be delayed.
3. Some Purchase Requests may be forwarded to the Administrator for approval if deemed necessary by the MM department.
4. If a Department Manager is unavailable to sign a request that must be processed right away, the request will be forwarded to the Administrator for purchase approval.
5. Do not use a Purchase Request for more than one vendor or for requesting stock items.

Alaska Department of Community and Economic Development

P.O. Box 110806, Juneau, Alaska 99811-0806

Alaska Business License

This is to certify that the licensee named below holds Alaska Business License Number 280775 covering the period Thursday, February 13, 2003 through Friday, December 31, 2004.

Line of Business: Health Care and Social Assistance

CORDOVA COMMUNITY MEDICAL CENTER

PO BOX 160, CORDOVA AK 99574

Owner:

CITY OF CORDOVA

This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State of Alaska or of the United States.

Commissioner: Edgar Blatchford
Department of Community and Economic Development

This license must be posted in a conspicuous place at the business location. It is not transferable or assignable.

DATE (MM/DD/YYYY)
07/24/2003

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

NAIC #

38733

INSURER C:

INSURER D:

INSURER E:

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRCD		TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC	03GPS03304	07/01/2003	07/01/2004	EACH OCCURRENCE	\$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000					
	MED EXP (Any one person)	\$ 5,000					
	PERSONAL & ADV INJURY	\$ 1,000,000					
	GENERAL AGGREGATE	\$ 2,000,000					
	PRODUCTS - COMP/OP AGG	\$ 2,000,000					
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	03GAS03305	07/01/2003	07/01/2004	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	BODILY INJURY (Per person)	\$					
	BODILY INJURY (Per accident)	\$					
	PROPERTY DAMAGE (Per accident)	\$					
	AUTO ONLY - EA ACCIDENT	\$					
	OTHER THAN EA ACC	\$					
	AUTO ONLY: AGG	\$					
		\$					
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO					
B		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$ 10,000	72UXP0262001	07/01/2003	07/01/2004	EACH OCCURRENCE	\$ 10,000,000
	AGGREGATE	\$ 10,000,000					
		\$					
		\$					
		\$					
		\$					
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	03GWS03306	07/01/2003	07/01/2004	WC STATU- TORY LIMITS	OTH- ER
	E.L EACH ACCIDENT	\$ 1,000,000					
	E.L DISEASE - EA EMPLOYEE	\$ 1,000,000					
	E.L DISEASE - POLICY LIMIT	\$ 1,000,000					
B		OTHER Property	03GPS03304	07/01/2003	07/01/2004	Per Statement of Values at 90% co-insurance	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS									
---	--	--	--	--	--	--	--	--	--

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Lori Wing/DEBBY

Spielberg

MEDICAL INDEMNITY GROUP, L.L.C.

Gary K. Billingsley

CERTIFICATE OF INSURANCE

This is to certify that the Policy(s) of Insurance listed below have been issued as noted hereon for the Policy Period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the Policy(s) described herein is subject to all the Terms, Exclusions, and Conditions of such Policy(s).

COVERAGES

INSURED: Cordova Community Medical Center

ISSUE DATE: 01/31/03

INSURER: Travelers Casualty and Surety Company of America

POLICY NUMBER: 081 LB 103497530

RISK CLASS: Acute Care Hospital

POLICY INCEPTION: 02/02/03

EXPIRATION: 02/02/04

POLICY RETROACTIVE DATE: Date of Incorporation

ADDITIONAL NAMED INSURED:

INCEPTION DATE:

RETROACTIVE DATE:

TYPE OF INSURANCE:

LIMIT OF LIABILITY:

- | | |
|--|---|
| <input type="checkbox"/> Professional Liability – Claims-Made Form | \$ |
| <input type="checkbox"/> Commercial General Liability – Occurrence Form
(Premises & Operations) | \$ |
| <input type="checkbox"/> Excess/Umbrella | \$ |
| <input checked="" type="checkbox"/> Directors & Officers Liability | \$2 Million Per Claim/\$2 Million Aggregate |
| <input checked="" type="checkbox"/> Subject to Retention of \$25,000 Per Claim/No Aggregate | |

Description of Operations/Locations/Vehicles/Special Items: Proof of coverage for Directors & Officers Liability Insurance, including Entity, Employment Practices Liability and Punitive, Exemplary and Multiplied Damages, with a Sub-Limit of \$1 Million and EMTALA Liability with a Sub-Limit of \$150,000. (Please Note: The Duty To Defend rests with the Insured.)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICY(S).

CERTIFICATE HOLDER	CANCELLATION
Mr. John Vowell, Administrator Cordova Community Medical Center P.O. Box 160 Cordova, AK 99574	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE COMPANY WILL ENDEAVOR TO NOTIFY THE CERTIFICATE HOLDER IN A TIMELY MANNER, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OF ANY KIND UPON THE COMPANY, ITS AGENTS, OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: ♦ <i>Christi Hout</i>

MEDICAL INDEMNITY GROUP, L.L.C.

Gary K. Billingsley

CERTIFICATE OF INSURANCE

This is to certify that the Policy(s) of Insurance listed below have been issued as noted hereon for the Policy Period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the Policy(s) described herein is subject to all the Terms, Exclusions, and Conditions of such Policy(s).

COVERAGES

INSURED: Cordova Community Medical Center

ISSUE DATE: 12/30/02

INSURER: Lexington Insurance Company

POLICY NUMBER: 200-46-84 & 200-46-81

RISK CLASS: HOSPITAL, ACUTE CARE

POLICY INCEPTION: 01/01/03

EXPIRATION: 01/01/04

POLICY RETROACTIVE DATE: 01/01/03

ADDITIONAL NAMED INSURED:

INCEPTION DATE: 01/01/03

RETROACTIVE DATE: 01/01/03

TYPE OF INSURANCE:

LIMIT OF LIABILITY:

<input checked="" type="checkbox"/>	Professional Liability – Claims-Made Form	\$1 Million Per Claim/\$3 Million Per Aggregate
<input checked="" type="checkbox"/>	Subject to Deductible of <input type="text" value="\$25,000"/> per Claim/No Agg.	
<input checked="" type="checkbox"/>	Premises Liability – Occurrence Form	\$1 Million Per Claim/\$3 Million Per Aggregate
	(Premises & Operations)	
<input checked="" type="checkbox"/>	Subject to Deductible of <input type="text" value="\$25,000"/> per Claim	
<input checked="" type="checkbox"/>	Excess/Umbrella	\$ 1 Million Per Claim/\$1 Million Per Aggregate
<input type="checkbox"/>	Subject to Deductible of <input type="text" value="\$"/> per Claim	

Description of Operations/Locations/Vehicles/Special Items: PROOF OF COVERAGE FOR HEALTHCARE PROFESSIONAL AND COMMERCIAL GENERAL LIABILITY INSURANCE. COVERAGE INCLUDES ALL EMPLOYED AND/OR CONTRACTED PRACTITIONERS AND NON-PHYSICIAN STAFF, ALL OF WHOM SHARE THE LIMITS WITH THE MEDICAL CENTER.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICY(S).

CERTIFICATE HOLDER	CANCELLATION
CORDOVA COMMUNITY MEDICAL CENTER P.O. BOX 160 CORDOVA, AK 99574	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE COMPANY WILL ENDEAVOR TO NOTIFY THE CERTIFICATE HOLDER IN A TIMELY MANNER, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OF ANY KIND UPON THE COMPANY, ITS AGENTS, OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: <i>Christi Horst</i>

[AKIAK-HOSPICORDOVMCIC0103-04HPLCGLUMB.CO1]

APPENDIX B
ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES GRANT ASSURANCES

Applicants must indicate their intention to comply with all terms and conditions of the original Request for Proposals or Request for Letters of Interest, the terms and conditions of any grant awarded by the Department of Health and Social Services (DHSS), and with 7 AAC 78, Grant Regulations, as well as all applicable grant program statutes and regulations. The Applicant also gives assurance that it will provide or comply with the following:

- (1) Applicant declares and represents that it is a non-profit organization, or is otherwise eligible to receive a grant under 7 AAC 78.030.
- (2) The provision of workers' compensation insurance. The provision of comprehensive general liability insurance. The provision of liability insurance if automobiles are used for the purpose of this grant program. The provision of professional liability insurance when applicable to the services performed under the grant.
- (3) Compliance with the requirements of the Civil Rights Act of 1964, (42 U.S.C. 2000d).
- (4) Compliance with the requirements of the Americans with Disabilities Act, (42 U.S.C. 12101-12213).
- (5) Compliance with the Drug-Free Workplace Act of 1988, (42 U.S.C. 701-707).
- (6) OSHA regulations requiring protection of employees from blood borne pathogens and that the Department of Labor must be contacted directly with any questions.
- (7) Compliance with AS 18.80.220 and other federal and state laws and regulations preventing discriminatory employment practices.
- (8) Compliance with the Health Insurance Portability & Accountability Act of 1996 and other federal and state requirements for safeguarding information, preserving confidentiality and for the secure transmission of all records, whether electronic or not, to DHSS. Any information about DHSS clients that is obtained or developed under grant funds is confidential. Client information cannot be released without the written authorization of DHSS, except as permitted by other state or federal law.
- (9) Provide state officials, or a third party contractor hired under 7 AAC 78.240, access to financial and program records of the grant project.
- (10) Maintenance of financial and program records for audit; and compliance with single audit regulations per 2 AAC 45 and applicable federal audit requirements.
- (11) Ensuring that grant funds will not be used for lobbying or fund raising.
- (12) According to the terms of the Grant Agreement, and upon request of the DHSS, submission of fiscal reports, project narrative reports, project updates and other grant project reports, a final project report, and project data.
- (13) Per number 3 above, religious belief or affiliation cannot be either a requirement for service or a factor in the denial of service under these grants.
- (14) Require criminal screening of both paid and volunteer employees having supervisory or disciplinary power over children or dependent adults, to be completed and submitted within 45 days of hire, under the authority of 7 AAC 78.170 and AS 12.62.160(b)(10).
- (15) Compliance with AS 47.17.010 Child Protection and AS 47.24.010, Reports of Harm, including notification to employees of their responsibilities under that section to report harm to children and vulnerable adults.
- (16) Applicant gives its assurance that any publications, printed materials, or electronic media developed under the grant will give appropriate credit to the Division of (DIVISION NAME), Alaska Department of Health and Social Services; and that any materials and media developed or property purchased with grant funds are the property of the State of Alaska, unless otherwise agreed to by both parties in the terms of the grant agreement
- (17) Applicants providing Medicaid reimbursable services will have a Medicaid Provider Number, or apply to obtain one, and seek Medicaid reimbursement for all eligible services.
- (18) Grantees providing residential and/or critical care services to clients of DHSS shall have an emergency response and recovery plan, approved by the agency's board of directors; that provides for safe evacuation, housing and continuing services in the event of flood, fire, earthquake, severe weather, prolonged loss of utilities, or other emergency that presents a threat to the health, life or safety of clients in their care.
- (19) Grantee has established purchasing practices and procedures for the use of grant funds that are compliant with 7 AAC 78.270.

I, William D. McKinnon, the Chief Executive Officer of, Cordova Community Medical Center

hereby assure the Department of Health and Social Services that, should my organization receive funding for the

Denali Commission grant program, it will comply with the assurances listed on this page.

William D. McKinnon 08/21/03 CEO/Administrator
Signature Date Title

CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)."

1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67, Section 67.510—

A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a

public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67 Sections 67.615 and 67.620—

A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug-free awareness program to inform employees about—

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will—

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction.

Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted—

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

Check ☐ if there are workplaces on file that are not identified here.

DRUG-FREE WORKPLACE (GRANTEES WHO ARE INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67; Sections 67.615 and 67.620—

A. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and

B. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to the granting agency.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

1. Grantee Name and Address:

Cordova Community Medical Center
P.O. Box 160
Cordova Alaska, 99574

92-0139 171

2. Application Number and/or Project Name

3. Grantee IRS/Vendor Number

Denali Commission Grant

4. Typed Name and Title of Authorized Representative

William D. McKinnon, CEO / Administrator

William D. McKinnon CEO / Administrator 08/21/03

5. Signature

6. Date

ASSURANCES - CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0042), Washington, DC 20503.

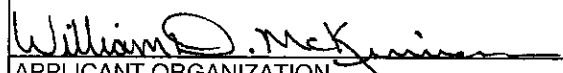
PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.
4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or State.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements.
14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL 	TITLE CEO / Administrator
APPLICANT ORGANIZATION Cordova Community Medical Center Cordova Alaska, 99574	DATE SUBMITTED July 23, 2003

Cordova Community Medical Center
Capital Budget Report
Year to Date thru June 2003
*** PRELIMINARY ***

<u>Department</u>	<u>Description</u>	<u>Budget</u>	<u>YTD Spent</u>	<u>Balance Remaining</u>
Clinic	Radiosurgery Unit	3,500.00		3,500.00
Clinic	Automated Defibrillator	4,722.00	6,187.80	(1,465.80)
Clinic	Copier - Sharp AR-235	4,995.00	4,995.00	-
Dietary	Dishwasher	7,400.00	8,028.74	(628.74)
Info Systems	Power Point Projector	2,700.00		2,700.00
Info Systems	New Computers (7)	9,100.00	9,421.00	(321.00)
Laundry	Washing Machine	7,400.00	7,661.41	(261.41)
Laundry	Dryer	3,100.00	3,620.72	(520.72)
Maintenance	Circulating Pumps	1,200.00	2,010.00	(810.00)
Maintenance	Roof over Generator Radiators & Emergency Exit	15,000.00		15,000.00
Maintenance	Marine Radio with Battery Back-up Power	1,500.00	687.67	812.33
Nursing	Gurney	1,300.00		1,300.00
Nursing	Automated Defibrillator	10,000.00	10,294.00	(294.00)
Nursing / LTC	Lift / Recliner Chair	1,000.00		1,000.00
Nursing / LTC	Nightstands & Dressers (6 each)	2,100.00		2,100.00
Nursing / LTC	Mattresses (6)	1,200.00		1,200.00
Nursing / LTC	Lift System	3,000.00		3,000.00
Nursing / LTC	Televisions (6)	3,000.00	2,297.08	702.92
Nursing / LTC	Refurbished Patient Beds (6)	12,000.00	14,394.52	(2,394.52)
Physical Therapy	NuStep Exercise Equipment	3,195.00	3,504.03	(309.03)
Physical Therapy	Adjustable Mat Table	1,600.00	2,079.73	(479.73)
Radiology	Radiology room freight, de-installation, room prep	18,500.00	16,821.37	1,678.63
Long Term Care	Senior Bus	55,000.00		55,000.00
	Clinic Redesign	38,900.00	68,021.83	(29,121.83)
Sub-Total		211,412.00	160,024.90	51,387.10
City of Cordova has Reimbursed				
Maintenance	Repair / Replace Parking Lot Lights		17,411.64	
Prior Year Projects - Continued				
Maintenance	Air Handling System	48,967.45	48,967.45	-
Maintenance	Generator system upgrade (Grant Funded)	50,000.00	37,049.14	12,950.86
Lease Purchased Equipment				
Radiology	Quantum Radiographic & Fluoroscopic system		84,500.00	
Radiology	Portable X-Ray unit		25,000.00	
Laboratory	Chemistry Analyzer		47,850.00	
Total			420,803.13	